Gen-Probe Prodesse, Inc.
Prodesse® ProParaflu®+ Assay Special 510(k) Submission

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# 510(k) SUMMARY

**CONTACT** 

Emily Ziegler Scientist I Gen-Probe Prodesse, Inc. 20925 Crossroads Circle Waukesha, WI 53186

AUG 2 6 2013

NAME OF DEVICE

Trade Name:

Prodesse® ProParaflu®+ Assay

Regulation Number:

21 CFR 866.3980

Product Code:

OOU, OOI

Classification Name:

Nucleic acid amplification assay for detection and differentiation

of Parainfluenza 1, Parainfluenza 2, and Parainfluenza 3

PREDICATE DEVICE

K091053, ProParaflu<sup>TM</sup>+ Assay

## **INTENDED USE**

The Prodesse® ProParaflu®+ Assay is a multiplex Real-Time PCR (RT-PCR) in vitro diagnostic test for the qualitative detection and discrimination of Parainfluenza 1 Virus, Parainfluenza 2 Virus and Parainfluenza 3 Virus (HPIV-1, HPIV-2 and HPIV-3) nucleic acids isolated and purified from nasopharyngeal (NP) swab specimens obtained from individuals exhibiting signs and symptoms of respiratory tract infections. This Assay targets the conserved regions of the Hemagglutinin-Neuraminidase (HN) gene of HPIV-1, HPIV-2 and HPIV-3, respectively. The detection and discrimination of HPIV-1, HPIV-2 and HPIV-3 nucleic acids from symptomatic patients aid in the diagnosis of human respiratory tract parainfluenza infections if used in conjunction with other clinical and laboratory findings. This test is not intended to detect Parainfluenza 4a or Parainfluenza 4b Viruses.

Negative test results are presumptive and should be confirmed by cell culture. Negative results do not preclude Parainfluenza 1, 2 or 3 virus infections and should not be used as the sole basis for treatment or other management decisions.

#### PRODUCT DESCRIPTION

The ProParaflu+ Assay enables detection and differentiation of Parainfluenza 1 Virus, Parainfluenza 2 Virus, Parainfluenza 3 Virus and internal control nucleic acid. Nasopharyngeal swab specimens are collected from patients with signs and symptoms of a respiratory infection using a polyester, rayon or nylon tipped swab and placed into viral transport medium.

A Universal Internal Control (UIC) is added to each sample prior to nucleic acid isolation to monitor for inhibitors present in the specimens. The isolation and purification of the nucleic acids is performed using either a MagNA Pure LC Instrument (Roche) and the MagNA Pure Total Nucleic Acid Isolation Kit (Roche) or a NucliSENS® easyMAG<sup>TM</sup> System (bioMérieux)

and the Automated Magnetic Extraction Reagents (bioMérieux).

The purified nucleic acids are added to ProParaflu+ Supermix along with enzymes included in the ProParaflu+ Assay Kit. The ProParaflu+ Supermix contains oligonucleotide primers and target-specific oligonucleotide probes. The primers are complementary to highly conserved regions of genetic sequences for these respiratory viruses. The probes are dual-labeled with a reporter dye attached to the 5'-end and a quencher dye attached to the 3'-end (see table below).

Analyte	Gene Targeted	Probe Fluorophore	Absorbance Peak	Emission Peak	Instrument Channel
Parainfluenza 1 Virus	Hemagglutinin neuraminidase	FAM	495 nm	520 nm	FAM
Parainfluenza 3 Virus	Hemagglutinin neuraminidase	CAL Fluor Orange 560	540 nm	561 nm	TET
Parainfluenza 2 Virus	Hemagglutinin neuraminidase	CAL Fluor Red 610	595 nm	615 nm	Texas Red
Universal Internal Control	N/A	Quasar 670	647 nm	667 nm	Universal Internal Control

Reverse transcription of the RNA in the sample into complementary DNA (cDNA) and subsequent amplification of DNA is performed in a Cepheid SmartCycler<sup>®</sup> II instrument. In this process, the probe anneals specifically to the template followed by primer extension and amplification. The ProParaflu+ Assay is based on Taqman chemistry, which utilizes the 5' – 3' exonuclease activity of the Taq polymerase to cleave the probe thus separating the reporter dye from the quencher. This generates an increase in fluorescent signal upon excitation from a light source. With each cycle, additional reporter dye molecules are cleaved from their respective probes, further increasing fluorescent signal. The amount of fluorescence at any given cycle is dependent on the amount of amplification products present at that time. Fluorescent intensity is monitored during each PCR cycle by the SmartCycler II instrument.

#### **DEVICE COMPARISON**

The modified ProParaflu+ Assay differs from the current kit in the following ways:

- Outsourcing of internal control stock manufacturing leading to a change in control vector;
- Universal Internal Control, consisting of an RNA *in vitro* transcript and a DNA plasmid, incorporated into the kit;
- The 1:10 dilution step of the positive control performed by customers has been removed;

The labeling was updated accordingly to incorporate the modifications listed above.

#### SUBSTANTIAL EQUIVALENCE

- 1. The Intended Use and Warnings or Precautions of the modified device as described in the labeling have not changed.
- 2. The modifications detailed in the table below have not had any effect or caused any changes to the fundamental scientific technology of the device.

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Modification	Potential Impact of Modification	Verification/Validation Result
Outsourcing of internal control leading to minor changes in sequence Incorporation of a Universal Internal Control, containing both RNA and DNA internal control sequences.	Modification of the internal control may affect the ability of the device to detect the target organisms.  Additionally, it may change the clinical performance of the ProParaflu+ Assay.	The UIC did not affect the ability of the ProParaflu+ Assay to detect target organisms at the limit of detection as evinced by the results of Analytical Sensitivity, IC Interference, Extractor Equivalency, and Sample Stability studies. Additionally, the results of a retrospective clinical comparison study demonstrated the modified ProParaflu+ Assay with UIC continues to meet the performance claims for the current ProParaflu+ Assay.
Positive control provided "at use" concentration, no dilution is necessary.	Changes in the testing concentration may affect the performance of the positive control in terms of stability or ability to detect global assay failures.	A Positive Control Effectiveness Study demonstrated the positive control's continued ability to monitor for global assay failures at the increased testing concentration.

- 3. Verification and validation studies performed demonstrated that all clinical and analytical performance/functionality remains unchanged from the previous device.
- 4. The appropriate Design Control activities were performed;
  - a. A Risk Analysis was performed and did not raise any new concerns of safety and efficacy associated with the modifications.
  - b. A declaration of conformity with design controls has been submitted.

The modified ProParaflu+ Assay is substantially equivalent to the current legally marketed device, ProParaflu+ Assay.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

August, 26 2013

Emily Ziegler Scientist I Gen-Probe Prodesse, Inc. 20925 Crossroads Circle Waukesha, WI 53186

Re: K132238

Trade/Device Name: Prodesse ProParaflu\*+ Assay

Regulation Number: 21 CFR 866.3980

Regulation Name: Respiratory Virus Panel Multiplex Nucleic Acid Assay

Regulatory Class: Class II Product Code: OOU. OOI Dated: July 16, 2013 Received: July 30, 2013

Dear Ms. Ziegler:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food. Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations. Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <a href="http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm">http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm</a>. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

# Sally A. Hojvat -S

Sally Hojvat, M.Sc., Ph.D.
Director, Division of Microbiology Devices
Office of In Vitro Diagnostics
and Radiological Health
Center for Devices and Radiological Health

Enclosure

Gen-Probe Prodesse, Inc.
Prodesse® ProParaflu®+ Assay Special 510(k) Submission

### **Indication for Use**

510(k) Number (if known): K132238

Device Name: Prodesse® ProParaflu®+ Assay

Indication for Use:

The Prodesse® ProParaflu®+ Assay is a multiplex Real-Time PCR (RT-PCR) in vitro diagnostic test for the qualitative detection and discrimination of Parainfluenza 1 Virus, Parainfluenza 2 Virus and Parainfluenza 3 Virus (HPIV-1, HPIV-2 and HPIV-3) nucleic acids isolated and purified from nasopharyngeal (NP) swab specimens obtained from individuals exhibiting signs and symptoms of respiratory tract infections. This Assay targets the conserved regions of the Hemagglutinin-Neuraminidase (HN) gene of HPIV-1, HPIV-2 and HPIV-3, respectively. The detection and discrimination of HPIV-1, HPIV-2 and HPIV-3 nucleic acids from symptomatic patients aid in the diagnosis of human respiratory tract parainfluenza infections if used in conjunction with other clinical and laboratory findings. This test is not intended to detect Parainfluenza 4a or Parainfluenza 4b Viruses.

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Prescription Use X And/Or Over the Counter Use ...
(21 CFR Part 801 Subpart D) (21 CFR Part 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE; CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of Center for Devices and Radiological Health (CDRH)

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